

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mr. G		11/4/00
O.I.P.E. CLASSIFIER		11	11/7
FORMALITY REVIEW		71622	12/1/00
RESPONSE FORMALITY REVIEW		71622	3/15/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 u Allowed I Interference
 (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	5/1/00
2	5/1/00
3	5/1/00
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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